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UTILITY

Attomey Docket No. PRD2053USNP

F PATENT APPLICATION	First Inventor		Brett Allison				
TRANSMITTAL	Title		BENZO [1,2,5] THIADIAZOLE COMPOUNDS				
(only for new nonprovisional applications under 37 CFR		/ No			<u>%</u> ₽		
APPLICATION ELEMENTS	Express Mail Lat		EU642147326US RESS TO:				
See MPEP Chapter 600 concerning utility patent app contents.	lication	ADD		Mail Stop Patent Applicatio Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450			
 Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing) Applicant claims small entity status. Specification [Total Pages 196] (Preferred arrangement set forth below) - Descriptive Title of the Invention 		 7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) 				or	
 Cross Reference to Related Applications Statement Regarding Fed sponsored R&D Reference to sequence listing, a table, or a computer program listing appendix Background of the Invention Brief Summary of the Invention Brief Description of the Drawings (if filed) Detailed Description Claim(s) Abstract of the Disclosure 		b. ☐ Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper c. ☐ Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. ☐ Assignment Papers (cover sheet & document(s)) 10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney (when there is an assignee) 11. ☐ English Translation Document (if applicable)				еу	
 4. ☐ Drawing(s)(35 USC 113) [Total Sheets] 5. Oath or Declaration [Total Pages4] a. ☑ Newly executed (original or copy) b. ☐ Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed) i. ☐ DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 			12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations 13. ☐ Preliminary Amendment 14. ☑ Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. ☐ Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. ☐ Other				
6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76. Continuation Divisional Continuation-in-Part (CIP) of prior application No.: , filed Prior application information: Examiner Group Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS							
Customer Number or Bar Code Label 000027777 or Correspondence Address below Name: Philip S. Johnson, Esq. Address: Johnson & Johnson One Johnson & Johnson Plaza							
New Brunswick, NJ 08933-7003 USA							
20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to John W. Harbour at: Telephone: (732) 524-2169 Fax: (732) 524-2808							
21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
NAME John W. Harbour				Reg. No. 31365			
SIGNATURE The WHO	<u></u>						
DATE March 26, 2004					_		

16805 U.S. P.1.2.

FEE TRANSMITTAL

Com	plete if Known	_
Application Number		
Filing Date		
First Named Inventor	Brett Allison	_
Group Art Unit		_
Examiner Name		_
Attorney Docket Number	PRD2053USANP	

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)		(3)	(4)	(5)
FOR:	NUMBER FI	LED	NUMBER EXTRA	RATE	BASIC FEE \$770.00
TOTAL CLAIMS	32 - 20 =		12	x 18.00	\$ 216.00
INDEPENDENT CLAIMS	7 - 3 =		4	x 86.00	\$ 336.00
MULTIPLE DEPENDENT CLAIMS			N/A	\$290.00	
				TOTAL FEES	\$1,322.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/PRD2053/JWH in the amount of \$1,322.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/PRD2053/JWH. Three copies of this sheet are enclosed.

SUBMITTED B	Complete (if applicable)		
Typed or			D N 04 005
Printed Name	John W. Harbour /		Reg. No. 31,365
Signature	ThwWHar	Date: March 26, 2004	Deposit Account No. 10-0750

DOCKET NO. PRD2053

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Brett Allison

For : BENZO[1,2,5]THIADIAZOLE COMPOUNDS

Express Mail Certificate

"Express Mail" mailing number: EU642147326US

Date of Deposit:

March 26, 2004

I hereby certify that this complete application, including specification pages, claims and Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Laurie Phillips

(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)